		PART B	<b>3 - FEE(S)</b>	TRANSMITTAL		مراكب	
Complete and send the	nis form, together wi	th applicable f	ee(s), to: <u>M</u> or <u>F</u>	Commissioner for P.O. Box 1450 Alexandria, Virg	E FEE or Patents ginia 22313-1450		
INSTRUCTIONS: This for paper operate. All further corrected by maintained the notification	espondence including the elow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and Prders and notifically specifying a	UBLICATION FEE (if required ication of maintenance fees value new correspondence address	ired). Blocks 1 through 4 will be mailed to the curren ; and/or (b) indicating a ser	should be completed where t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  7590 05/25/2004  Ray L. Weber Renner, Kenner, Greive, Bobak, Taylor & Weber First National Tower, Fourth Floor Akron, OH 44308-1456				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile			
				Ray L	Ray L. Weber (Depositor's name) (Signature)		
				June	28, 2004	(Date)	
APPLICATION NO.	97/03/2003	FIRST NAMED I			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/613,197 TITLE OF INVENTION: PO		ASED ELEMENT	John J. M	_	HOO.P.21	4576	
APPLN, TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	08/25/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
FOELAK, MORTON		1711 521-090000					
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Renner, Kenner,  Greive, Bobak,  Taylor & Weber				
3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNE The Hoover ©	an assignee is identified be to the USPTO or is being s E	low, no assignee de submitted under sep (B	ata will appear parate cover. C ) RESIDENCE	(print or type) on the patent, Inclusion of assumpletion of this form is NOTE: (CITY and STATE OR COURT, Ohio 44720		iate when an assignment has signment.	
Please check the appropriate	assionee category or catego	ries (will not be pri	inted on the nat	tent): Dindividual <b>연</b> .c	corneration or other private of	roup entity	
4a. The following fee(s) are e			. Payment of F		or polation of other private g	Toup tilety 2 government	
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